

Ethics - Problematic Issues

& Decision Making

GSC
Home Study Courses

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STOP

BEFORE READING THIS COURSE

PRETEST YOUR KNOWLEDGE OF THIS SUBJECT.

**PLACE YOUR ANSWERS IN THE *PRETEST* COLUMN OF
THE SEPARATE ANSWER SHEET INCLUDED WITH
THIS COURSE BOOKLET.**

**THE TEST QUESTIONS ARE THE SAME FOR BOTH THE
PRETEST AND THE POST-TEST. THE TEST QUESTIONS
ARE FOUND AT THE BACK OF THIS COURSE
BOOKLET.**

AFTER COMPLETING THE PRETEST

THEN

READ THE COURSE

THEN

**TAKE THE POST-TEST FOR CREDIT AND SEE HOW
MUCH YOU HAVE LEARNED.**

**TO GET THE MOST OUT OF THIS GSC HOME STUDY
COURSE USE THE PSQ4R LEARNING SKILLS
TECHNIQUE DESCRIBED ON THE FOLLOWING PAGES.
GOOD LUCK.**

How to get the most out of your GSC Home Study Course using the PSQ4R technique!

Continuing education should provide the licensee with timely information that can be recalled for day to day use. Each GSC Home Study CE Course was planned and produced in accordance with the PSQ4R method described in the following paragraphs. GSC Home Study has found the PSQ4R method useful for retention of new or updated information.

PSQ4R, a method for improving reading comprehension, has been used by dozens of colleges and universities.

P = Purpose

S = Survey

Q = Question

4Rs = Read Selectively, Recite, Reflect, and Review.

1. Determine your **purpose** for reading this course. For many of you it may be merely to obtain continuing education credit to maintain your license. But, take a moment and look beyond this reason, what is it about this particular course topic that interests you? How does it relate to your current practice? (Est. Time- 5 minutes)
2. Test your knowledge of the course subject matter prior to reading the course by answering the course examination questions at the back of the booklet. Use the pretest column of the answer sheet to write your answers. (Est. Time-20 minutes)
3. **Preview** the course by surveying or skimming the course objectives, subject headings, illustrations, graphics and test questions. Pay attention to the first sentences, introductions, conclusions or summaries in the course. Write down any words that are unfamiliar to you. (Est. Time-15 minutes)
4. Make up **questions** using the section headings as a guide. Write the questions on a blank sheet of paper and leave space for your answers (2-3 inches). For example, if the section heading states "Diagnosis of Alzheimer's Disease", write the question "What are the current criteria used to diagnose Alzheimer's disease?" leaving space for the answer later on. (Est. Time-15 minutes)
5. **Read selectively** to find the answers to your "section-heading" questions. Write your answers in the space you provided. Be sure to write down and/or look up any words that are or were unfamiliar to you. Also, as you continue to read don't forget to look for ideas and information that are in alignment with your purpose for taking the course. (Est. Time- 80 minutes)
6. **Recite** the answers to your questions, by reading the question aloud with the answer covered up. Use your own words as much as possible. If you don't recall the answers, look over that section again. (Est. Time-5 minutes)

7. **Reflect** on the information in the section you've just read. Try to make a simple outline, table, flow diagram or "doodle". (Est. Time-5 minutes)
8. **Review** "section-heading" questions and answers, diagrams and outlines. (Est. Time- 20 minutes)
9. Take the Course Examination. Place your answers on the detached answer sheet posttest column inserted with your course packet. (Est. Time-30 minutes)

Normal Estimated Time to Complete this GSC Home Study CE Course Activity

Taking pretest	20	minutes
Reading course	90	minutes
Taking posttest	30	minutes
Re-reading course to locate answers	40	minutes
<u>TOTAL time</u>	<u>180</u>	<u>minutes</u>

Estimated Time to Complete this GSC Home Study CE Course Activity using the PSQ4R Method for Improving Your Reading Comprehension

Determine the Purpose for taking the course	5	minutes
Take the pretest	20	minutes
Preview the course	15	minutes
Make up Questions	15	minutes
Read Selectively	80	minutes
Recite the answers to your questions	5	minutes
Reflect the information you just read in the course	5	minutes
Review questions, diagrams, and outlines	20	minutes
Take the posttest	30	minutes
<u>TOTAL time using the PSQ4R method</u>	<u>195</u>	<u>minutes</u>

Use the method you think will be the better use of your time.

TABLE OF CONTENTS

INTRODUCTION

WHAT IS ETHICS?

ELEMENTS OF ETHICS

HEALTH CARE AND ETHICS

TYPES OF ETHICAL PROBLEMS

PROCESS OF ETHICAL DECISION-MAKING IN HEALTH CARE

ETHICAL ISSUES COMMON TO THE PRACTICE OF THE HEALTH-CARE PROFESSION

CASE STUDY

CONCLUSION

REFERENCES

COURSE EXAMINATION

COURSE OBJECTIVES

At the conclusion of this course the student will be able to:

Demonstrate an understanding of morality and ethics and distinguish between the two as they relate to health-care professions.

Recognize basic terms widely used in discussing ethical dimensions in health-care professions

Identify ethical elements involved in the everyday practice of the health-care profession.

Identify types of ethical problems common to health care.

Identify examples of concrete ethical situations and problems in health care.

Identify ethical situations and problems that are unique to the health profession.

Identify principles of problem-solving used in the process of ethical decision-making.

Acknowledgment
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INTRODUCTION

Technologies continue to promise longer life span, advancements in genetic knowledge, and improved reproductive sciences. These advancements pose many new ethical questions to the 21st century medical world. Problems requiring difficult decisions confront every health-care professional from time to time. In some cases, one person may be the sole voice in making the decision and in other cases, more than one person will approach an ethical problem as a team. The purpose of this course is to prepare allied health-care professionals for situations they may encounter in their professions that have an ethical component. It will introduce the reader to basic ethical theory and key terms used in medical ethics. The course has the primary goal of emphasizing practical approaches to identifying and dealing with ethical problems in health care.

WHAT IS ETHICS?

Ethics is a fundamental part of life for everyone in society and takes a specific form when someone assumes the role of a health-care professional. Evolved in the Western philosophical traditions since the golden age of Greece, ethics deals with the concept and analysis of morality, moral problems, and judgments. Ethics is a branch of philosophy often referred to as moral philosophy. It addresses important questions of human conduct that create some form of reference and guidance to us as individuals and as health-care professionals. Bioethics refers to the study of ethics as it relates to biology and the health-care profession. Whether one is a philosopher of ethics in a university setting or is confronted with ethics as an allied health professional, the challenge comes from two major domains of ethics defined as metaethics and normative ethics.

Metaethics tries to discover reasons for making a moral judgment about life, and describes the extent to which moral judgements are reasonable or otherwise justifiable. For example, do physical and occupational therapists or nurses view an act as right because society views it as right or do health-care providers believe the act is right even if many members of society do not agree? What kinds of reasons are valid when the health-care professional is trying to define something they think is right in the medical world? Literature in metaethics is directed to thinking about reasons for defending a particular position. It requires the health-care professional to become more aware of their beliefs, be it religious, philosophical or what they have been taught or told about what

is right or wrong. Normative ethics raises the question of what is right or what should be done in a situation that calls for a moral decision. It requires consideration of what types of values are morally good or bad for the harmonious functioning of society and the welfare of individuals. Normative ethics has two main theories that are relevant to health care. They are deontological and teleological theories. As with most medical terms breaking the word down helps define the term. Deonto is derived from the Greek word for duty. The root word telos refers to the word end. Deontological theories focus on duties and obligations in relationships that are based on performing certain actions or following certain rules or principles. Teleological theories propose that consequences of a specific moral act or rule are the determinants of the rightness or wrongness of the act or situation.

ELEMENTS OF ETHICS

Elements of ethics include duties, rights, and character traits. Duties associated with the health-care profession are generally thought of as an obligation to each individual's professional practice. Most health-care professionals view their primary obligations as to the patient, such as doing no harm. Along with the duty to avoid harm is the duty of fidelity. This particular element of ethics refers to being faithful to patient needs and meeting their reasonable expectations. Another very important principle of ethics in health care is rights. Rights can be defined as strict claims a person or group of persons places on society.

Rights that are relevant to health care are the right to life, the right to adequate health care, and the right to personal autonomy.

Character traits are another element of ethics describing the disposition to act in a certain way. To some extent, our society is measured by the type of people in it. Certain character traits enable an individual to be the kind of person (i.e. health-care professional) they wish to be. As an example, a therapist or nurse displaying the trait of honesty will manifest this trait in trying to refrain from the deceiving others for his or her own benefit. Courage is a character trait that may be required in order to speak out against injustice or wrongdoing. Courage combined with honesty can empower the health-care professional to admit to the patient that they mistakenly gave the wrong treatment. Compassion can help motivate the individual to refrain from thoughtlessly offending vulnerable patients.

In summary, duties and rights will help health-care professionals to have the conceptual tools for recognizing and working to resolve problems that arise in their everyday practice. The development of moral character will help the therapist, nurse or social worker prepare for difficult situations when no answers seem obvious.

HEALTH CARE AND ETHICS

The health sciences demand the abilities, special training and character of the care providers. Most of these demands require that individuals be guided by each profession's moral considerations. Health-care ethics, or "medical ethics", is primarily normative ethics specific to

the health sciences. It raises the question about what is right or what ought to be done in a health-care situation when moral decisions are needed.

It is argued that moral considerations in the health-care professions are not different from normal everyday moral considerations. In medical ethics, the difference occurs only with special situations in issues confronting the health-care provider. The task of health-care ethics therefore is not to discover a new principle or approach to ethical reasoning, but to prepare for the application of the established moral principles and rules.

In summary, health-care ethics is applied ethics, and as in general ethics the health-care professional cannot expect an automatic deducted procedure in health-care ethics for arriving at an ethical answer for every situation. Health-care ethics is not aimed at promoting a particular moral lifestyle nor does it encourage particular life values. Its role has been defined as functioning to stimulate or raise the consciousness of health professionals who are directly involved with ethical issues concerning health-care settings and policies.

TYPES OF ETHICAL PROBLEMS

Types of ethical problems include ethical distress, ethical dilemma, and the dilemma of justice. Ethical distress is the kind of problem a health professional faces when he or she is aware of what course of action is right but something is keeping them from taking that action. For example, a physical therapist sees one of his or her patients covered

by managed care or workman's compensation for the total number of allowed visits. The therapist feels this patient is just starting to show improvement, however, any further treatment has just been denied. On one hand, the therapist is well aware of the need for changes in health care and the issues of cost containment, but at the same time, feels this patient would definitely benefit from additional sessions. This situation could be applied to many other allied health-care groups as well.

An ethical dilemma is a common type of problem that involves two or more morally correct courses of action but only one can be pursued. In this situation, there is more than one right thing to do but the action of one necessarily prohibits from acting on the other. In essence, doing something right may also be wrong. As an example, a teenage boy arrives to the emergency room following a serious traffic accident. He is in need of a blood transfusion that may save his life. His parents arrive and are distressed about their son's condition, however, they explain to the attending emergency physician that their religion does not allow blood transfusions. In this circumstance, there is more than one right thing to do but the action of one will prohibit from acting on the other.

A dilemma of justice describes the problem that can arise in regard to evenly distributing social/societal benefits or burdens. The competition is among different individuals or groups, each of which wants a share of the available resources. In the medical world this can be medication, the health professional's time, money to pay for health care, an organ, or special procedures or treatments. The scarce supply of these resources requires difficult, and at times even tragic decisions

because to choose to provide for the good to one group may necessarily mean that there are not adequate resources available for others. One example of how health-care professionals may become involved in this type of dilemma is when there is a shortage of staff in their department. In this situation, the health-care worker may find himself or herself having to make difficult decisions about who will get the medical services and who will not. Why the professional chooses as they do, becomes important in determining whether the decision is in agreement with justice or proposes a dilemma.

Additional examples of the dilemma of justice include issues of authority that can surface once a decision has been made regarding the course of action. In this case, the health-care professional is confronted with another ethical problem relating to who should carry out the proposed action. Often institutional policies or social issues are influential in this case and the decision is already made for the health-care provider. However, even if this is the situation, several health-care professionals who assume legitimate authority for making a particular decision may arrive at different conclusions about how to achieve the best outcome for patient. They may disagree on the course of action and benefit, or desired outcome.

A difference in professional expertise can bring about a dilemma. However, this should not be the case, as many different levels and areas of expertise can and should work together to help benefit the patient. Each professional may have the opportunity to bring different aspects of expertise to the situation. For example, in some facilities, the

occupational therapist may do more hand and elbow treatments as well as see more foot conditions (especially if they require splinting or orthotics) than the physical therapist. This is part of the group effort and cohesiveness health-care teams strive to achieve. This however, can also lead to difficulties regarding who is legitimately the authority voice in a decision. In other words, in some areas of the patient care, each health-care professional is an authority on some part of a whole treatment plan.

Traditionally in the health-care system, the physician has been the authority voice by virtue of his or her role as a physician. In other words, the decision is considered within the realms of authority because of his or her office or position rather than being in authority. This is because of the physician's special expertise. Despite this role, the physician may choose to invite advice or council from another person. Sometimes the decision of a matter will come from a special institutional arrangement such as the hospital's policies. Hospital ethics committees become an important tool for managing complex ethical problems. Such committees are composed of several disciplinary groups and attempt to help clinicians, families, and patients think about and deal with complex ethical decisions.

PROCESS OF ETHICAL DECISION MAKING IN HEALTH CARE

In order for the health-care professional to solve or confront an ethically demanding situation, it is necessary to systematically assess all circumstances to help arrive at the best possible solution.

Following are five steps that can be used to analyze and solve ethical problems that arise in health care.

1. Gather relevant information—Initially, the medical professional gathers adequate and relevant information from the patient and/or the situation. This may include clinical indications such as determining if the illness or condition is acute, chronic, or even irreversible. In some cases, especially in nursing care, it is important to know if lifesaving treatment is considered medically futile. If the professional is new to the area and/or facility, it may be important to know what is the usual customary treatment for this type of condition. Also important in many cases is knowing whether the patient is informed of the condition, along with what the patient wishes. In some work settings, such as in a hospital or long-term care facility, the health-care professional needs to know if the patient is competent, and if not, how can the medical care provided ensure that this is what the patient would want. Also in such particular facilities the health professional should always know what that facility's policy is and which patients are possibly a "do not resuscitate" (DNR) code. Several external factors are influential when considering the information needed to help resolve any ethical problem. The potential cost of the treatment as well as the reimbursement issues are important in today's health care society. Other examples of information gathered to help in the decision

process is knowing the amount of available resources, such as a nurse being aware of the allotment of beds within the medical facility.

2. Determine the precise nature of the ethical problem—The health care professional needs to determine what type of ethical problems he or she is facing. Is it one of ethical distress where the health professional knows what course of action is right but something is keeping the person from doing it? Possibly it is an ethical dilemma, involving two or more morally correct courses of action but only one can be pursued. The other option is that the health-care professional may discover a dilemma of justice where a problem has arisen in regard to distributing the available resources such as time often needed for patient education, or family support.
3. Decide on the approach best to confront the problem—The correct way to approach the problem may be the deontological approach used to describe when one familiarizes oneself with the basic duties and rights of individuals and groups and acts in accordance with those guidelines. The other option is to take a more absolute approach, which rests on the notion that what is right is based on knowledge that can be known as truth despite accordance with those guidelines of the deontological approach.
4. Decide what should be done—The health-care professional needs to choose how best to confront the situation in an ethical manner after exploring options available. In the case of the workman's

compensation issue, possibly the situation could have been helped by trying to either arrange additional time for a thorough review of a home exercise program. In addition, consulting with the attending physician regarding a home health visit by the nurse and physical therapist would be another favorable option.

5. Pursue and complete the action—After all the information has been gathered and an approach has been planned, the next and final step is to put the plan onto action.

ETHICAL ISSUES COMMON TO THE PRACTICE OF THE HEALTH-CARE PROFESSION

Confidentiality

Many health-care professionals recognize that patient or client information considered confidential is anything that could be harmful, shameful, or embarrassing to the client. This may not solely be the case as other information; such as the where the individual works, marital status, and past medical problems is of a confidential nature and should be treated as such. Numerous people including clinicians and office personnel have access to this information from the onset of care. Confidential information does not necessarily have to come directly from the person or patient. It may be obtained in writing, through electronic data, or from a third party. Any time medical personnel believe there is a situation where a patient has a reasonable expectation that sensitive information will not be spread around, it is best to err on

the side of treating it as confidential. The general principle regarding potentially confidential information is to treat caution as a virtue.

But what if the patient offers information to the nurse or therapist during treatment? Is this now no longer confidential? The patient who shares confidential information not only has the right to keep it private, but within the health-care context, has a reasonable expectation that he or she can control the flow of information to further his or her own welfare. When you receive confidential information from patients, they expect that you will honor your professional promise of confidentiality. Every nurse, therapist and social worker can refer to their state's ethical guidelines of their respective professions for a discussion concerning confidentiality.

Keeping confidentiality is a general guideline of the health professional, which they can rely on to maintain a trusted professional/patient relationship. At times, keeping patient confidence is not easy or straightforward. Sometimes, however, the interests of society may seem to advise against keeping confidentiality. Current methods of record-keeping and information-sharing raise additional, difficult questions related to confidentiality. The health professional must rely on his or her judgment regarding the various duties of professional practice in order to arrive at a decision on how best to handle the situation.

Rights, Obligations, and Self Responsibilities in Health Care

Rights and obligations of both the patient and health-care professional are important. Clients have moral rights to determine what

will be done with their own bodies, to be given information necessary for them to make informed decisions, to be told the possible effects of care—including nursing care—and to accept, refuse, or terminate treatment. The focus for the past two decades has been on patient rights with little attention paid to patient obligations. More recently, focus has been shifted to patient obligations. One example is the emphasis placed on personal obligation to one's health and taking responsibility for the moderation of health risks. The health-care provider is obligated to meet patient needs and to act as the advocate in health-care organizations where cost containment continues to be a major goal.

The type of responsibility often discussed in health care is that of the health-care professional striving to become a better practitioner. The person who has become a health-care professional is required to continue to maintain a high level of professional competence by taking additional continuing education courses and demonstrate proficiency through peer presentations and public education. Almost all states require the therapist, nurse, etcetera, to demonstrate that they have taken some courses designed to enhance oneself professionally. The goal of these requirements is to not to safeguard the patient's interests but to maintain the professional's competence in the medical setting and foster a feeling of accomplishment and satisfaction.

Public Policy in Health-Care Delivery

Generally, policy refers to the course of action selected to guide present and future decisions of implementation. Public policy consists of

a course of action chosen by government and the principles guiding such choices should be the concerns of everyone in society.

Individually and on the whole, health-care professionals are involved in the development and implementation of policy in hospitals, clinics and communities in the public and private sector. Examples of this involvement range from policies determining allocation of nursing care in hospitals and nursing homes to legislative actions by the physical therapist to change reimbursement within health-care delivery systems.

Informed Consent

Informed consent is a process of decision-making based on fundamental legal and ethical principles. A procedure whereby patients consent to or refuse a medical intervention, informed consent is based on information provided by the health-care professional regarding the characteristics and potential consequences of the planned medical intervention. One of the major goals of informed consent is for the patient to make important decisions regarding their own medical care. It is this type of decision process that helps warrant that the medical intervention will be in the patient's best interests.

An informed consent form is used by the health-care professional to assist in carrying out a specific health-care procedure. This form will explain how the health professional intends to use specific diagnostic or treatment interventions for the purpose of bettering a patient's condition. Because of this feature in this type of form, the person is able to enter into decision making well informed about the procedure to be performed.

CASE STUDY

You are a physical therapist working in an acute care hospital when you notice one of your colleagues is having a significantly bad day. Shouting at the nurses inappropriately and snapping at his patients when they asked for a rest during their exercise programs, he is clearly losing control. This therapist has had more than one bad day recently and his work seems to be deteriorating. Today you ask him in passing how his day is going. He confides that he's been having a rough time with his marital relationship and is not sleeping well. He states that lately he has been so agitated, that at night having a few more drinks than usual doesn't phase him. Today you can clearly smell alcohol on him.

He asks you not to say anything to anyone, insisting that he's really okay and that working as a physical therapist helping patients throughout the day is all that keeps him going these days. He says that he is optimistic about his situation and that this rough period will soon pass. You believe that his definition of "a few more drinks" is probably open to interpretation. What's the right thing to do? The appropriate response when there is suspicion a health-care co-worker is having a problem with drugs or alcohol describes the deontological theory of normative ethics (duties and rights) or more specifically, the question of confidentiality versus disclosure.

You have an obligation to respect confidentiality, but you have a more compelling obligation or duty to protect patient safety and well-being.

Disclosure of information is often a gray area, as in this situation where the information revealed by the physical therapist was likely unintentional. The physical therapist didn't begin his comments with a request for confidentiality (which may or may not have been agreed to). There was no agreement to keep silent, so one could argue that there was no obligation. On the other hand, he has obviously given much more information than intended. The decision about disclosure on your part has to be influenced by the higher obligation to protect patients.

Gathering information about the therapist and his patients becomes the first step in the process of ethical decision making. Does this therapist's behavior suggest that his patients are at risk? Has there been any evidence of a problem other than being short on patience with the nursing staff and his patients during treatment? Have there been any obvious mistakes regarding patient safety, i.e., forgetting to use a gait belt when appropriate?

In the event there are obvious problems, then there is an obligation to protect patients from potential harm. Once it has been determined what type of ethical problem exists and the information has been gathered the health-care professional needs to put a plan into action to ethically confront the situation in the best interest of the patients as well as the therapist.

CONCLUSION

Health-care professionals face many new and old ethical questions in the new century. The amount and level of exposure to ethical theory varies tremendously among students of various health profession curricula. Even though health-care professionals may have been exposed to some ethics education, and understand the basic ethical concepts, psychological, social, and other practical dimensions of the situation are important to the decision-making process. These will be problems requiring difficult decisions. The professional will need to prepare his or her self for situations they may encounter in their professions. To keep current with ethical concepts in medicine, it becomes important for the health-care professional to devote attention to the interactions within institutional and societal health-care delivery systems.

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SCULLY, Rosemary M. and Barnes Marylou R. Physical Therapy. Philadelphia, PA: J.B. Lippincott Co., 1989.

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SUGGESTED READING

EDWARDS, Rem B. and Graber, Glenn C. Bioethics. Orlando, Florida: Harcourt Brace Jovanovich Inc., 1988.

COURSE EXAMINATION

Ethics—Problematic Issues and Decision-Making

DATE: _____

DO NOT REMOVE THIS EXAMINATION
FROM THIS COURSE BOOKLET

PLEASE READ THE FOLLOWING INSTRUCTIONS
BEFORE STARTING THE EXAMINATION:

Fill in your answers on the detached answer sheet inserted
with your course packet. Return the completed answer
sheet/course evaluation to
GSC Home Study Courses at the
address listed on the detached
answer sheet.

1. Ethics deals with:
 - A. Morality
 - B. Moral problems
 - C. Judgments.
 - D. All of the above
2. Ethics is a branch of philosophy referred to as:
 - A. Teleological theory
 - B. Moral philosophy
 - C. Metaethics
 - D. Normative ethics
3. Deontological theory refers to:
 - A. Duty
 - B. Rights
 - C. Consequences
 - D. A and B

4. An element of ethics that is generally thought of as an obligation to each individuals professional practice is known as:
- A. Duties
 - B. Rights
 - C. Character Traits
 - D. Morality
5. An element of ethics defined as precise claims a person or group of people place on society:
- A. Duties
 - B. Rights
 - C. Character Traits
 - D. Morality
6. An element of ethics describing the disposition to act in a certain way is known as:
- A. Duties
 - B. Rights
 - C. Character Traits
 - D. Morality
7. For the health-care professional to successfully confront an ethical situation, one needs to be able to systematically assess all circumstances to arrive at the best possible solution.
- A. True
 - B. False
8. Health-care ethics can be described as:
- A. Unfocused at promoting a particular moral lifestyle
 - B. Unbiased regarding particular life values
 - C. Stimulating or raising the consciousness of health professionals
 - D. All of the above
9. Which type of ethical problem involves two or more morally correct courses of action but only one can be pursued?
- A. Ethical distress
 - B. Ethical dilemma
 - C. Dilemma of justice
 - D. Ethical deception

10. Which type of ethical problem results when the course of action is right but there is something keeping the action from being taken.
- A. Ethical distress
 - B. Ethical dilemma
 - C. Dilemma of justice
 - D. Ethical deception
11. In health care, information such as where the individual works, marital status and past medical problems should be treated as:
- A. Public information
 - B. Confidential information
 - C. Information to be transferred only electronically to ensure confidentiality
 - D. Information allowed to be shared among health-care personnel only
12. When the patient determines what will be done with their own bodies, makes medically related decisions regarding their health, or is informed of the possible effects of care, the patient is exercising their:
- A. Obligation to health care
 - B. Moral rights
 - C. Patient/professional relationship
 - D. Self-responsibilities
13. Continuing education in health care is an ethical example of:
- A. Rights
 - B. Self-responsibilities
 - C. Moral rights
 - D. Teleological theory
14. Allocation of nursing care in hospitals and legislative actions by the physical therapist for changes in reimbursement resources are examples of:
- A. Public policy
 - B. Confidentiality
 - C. Dilemma of justice
 - D. Character traits

15. A process of decision-making based on fundamental legal and ethical principles where patients agree to or refuse a medical intervention is called:
- A. Informed confidentiality
 - B. Public policy
 - C. Informed consent
 - D. Self-responsibilities
16. A form used by the health-care professional to assist in carrying out a specific health-care procedure that explains how the interventions will be performed for the benefit of the patient is called a/an
- A. Living will document
 - B. Informed consent form
 - C. Plan of care form
 - D. None of the above
17. Disclosure of information often becomes a gray area especially when:
- A. The information is from a coworker
 - B. The information is revealed unintentionally
 - C. The information is from a patient
 - D. The information is from the administrative staff
18. Issues of authority are an example of which ethical problem?
- A. Ethical distress
 - B. Ethical dilemma
 - C. Dilemma of justice
 - D. Ethical deception
19. Because of the recent increased emphasis on personal obligation to one's health and moderation of health risk taking, focus has been shifted to patient:
- A. Obligations
 - B. Rights
 - C. Character Traits
 - D. Morality

20. Which of the following elements are important to health-care professionals in the ethical decision-making process?

- A. Psychological
- B. Social
- C. A and B
- D. None of the above

